WELSH BOARD OF HEALTH.
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BOROUGH OF ABERGAVENNY

Medical Officer

OF

Health's Report

1952

S. M. R. HARVEY, B.Sc., M.B., Ch.B., C.P.H.

Annual Report

1952

I have the honour to present the 70th Annual Report of the Medical Officer of Health, Abergavenny Borough.

The health of the population of the Borough has been well maintained. The crude death rate in 1952 is substantially lower than that experienced in the previous year and now compares favourably with the death-rate prevailing in the County of Monmouthshire and in England and Wales generally. Coupled with this decline in the death-rate, there has been an increase in the average age at death. In other words, the people are healthier and are living longer.

The present level of mortality is particularly noteworthy since the elderly form a considerable proportion of the town's population. Continued improvements in housing and social conditions together with a comparatively high percentage of full employment amongst the working population are probable factors partially responsible for this satisfactory decline. It is satisfactory to note that deaths attributed to Cancer have also decreased. Furthermore, Cancer of the lung, a subject of current controversy, has not featured as a cause of death within the Borough during this year. The majority of deaths are due to circulatory diseases as are the majority throughout the country ; Coronary Thrombosis taking the higher toll.

Though there have been no deaths of mothers through childbirth, and the infant mortality rate has decreased appreciably, the birth-rate, continues to fall. The need for a still further reduction in the Infant Mortality is emphasised as well as renewed efforts to improve the unsatisfactory housing conditions which still prevail in many parts of our Town.

The gradual decline of Infectious Diseases throughout this century has been maintained.

It is often not easy to establish the precise relationship between housing conditions and disease, but it is generally accepted

that bad housing conditions are inimical to the health of the people. In 1952, 130 new dwellings became available, another rung but on a very tall ladder as there remains 500 applicants on the housing waiting list. The problem of housing and the evils of overcrowding in Abergavenny remains acute. There are a number of Streets, e.g. Flannel Street, Tudor Street and Mill Street which under normal circumstances, would undoubtedly qualify as Clearance Areas. Due to circumstances beyond the control of the Council, it is only possible to deal with the very worst individual houses. It is appreciated that the Housing Authority is undertaking all possible steps to overcome the housing difficulties, and that the housing programme is proceeding.

Although the estimated population of the Borough in 1952 shows a slight increase, it has remained relatively static in numbers for many years. But it would appear that there has been a change in the age distribution. Due to an overall decline in the birth-rate (17.0 in 1952 against 24.3 in 1901) in the present century, there are fewer younger members in the community, whereas a longer expectation of life has increased the ranks of the elderly. Thus whilst the problem of care for the young is diminishing, for the aged, both medically and socially is increasing. None wish to die young and fortune is fickle, therefore it is in our own interest to see that adequate provision is made for the elderly. Here, the Local Authority can play its part. As the majority of the aged prefer to live in their own homes, I beg to draw the attention of the Housing Authority to the need for providing more bungalows and flats exclusively for old people. At the same time, care should be taken that they are not segregated. One questions, whether or not it would be possible to have greater co-operation between Local Authorities and Voluntary Societies. There is a need for improving the arrangements for feeding old people by means of meals on wheels, etc. Very often, the elderly lack companionship, and I am sure they would greatly benefit if other members of the community took a little more interest in them.

With one exception, the sanitary conditions in the town are satisfactory. I have previously mentioned the antiquated and ineffective method of Sewage Disposal, but I understand that it is proposed to remedy this deficiency as soon as possible.

Maternity and Child Welfare.

The Infant Welfare Clinic is held on the Tuesday of each week, and Ante-natal clinic on alternate Tuesdays. Mothers and children under 5 years of age from the Borough of Abergavenny and from the Rural District may attend at these Clinics. There are two Health Visitors and a Doctor in attendance.

I wish to stress here the importance of early and regular attendance of expectant mothers at the Ante-natal Clinic, so that any departure from the normal may be detected as soon as possible, and the necessary steps taken in respect of adequate care of the mothers. Unfortunately, too often many expectant mothers delay attending until late in pregnancy.

It is now the practice in the ante-natal clinic to make a routine blood examination of all patients for the purpose of detecting venereal diseases and for determining the pregnant mother's blood group. The educational side of ante-natal work is also of great importance and includes advice about general health, rest, diet, sleep and comfort.

In 1952 a monthly average of 197 babies attended the Infant Welfare Clinic. Welfare Food is obtainable at the Centre with the exception of National Dried Milk, Cod-liver Oil and Orange Juice which are obtainable at the Food Office.

The principle causes of Infant deaths are Prematurity. Congenital Debility, Congenital Abnormalities and Pneumonia. Adverse physical conditions and lack of care, which the older child can withstand, often prove fatal during earlier months of life.

Material resources (housing standards, sanitation, feeding etc.) parental care and medical and nursing services, each play a part in the infant's chance of survival. The Infant Welfare Clinic has an important role in the care of the infant and young child. Babies are weighed weekly and are seen regularly by the Doctor. Health Education is stressed and informal talks are given to mothers in the principles of hygiene and healthy living. The prevailing Infant Mortality Rate calls for renewed efforts on the part of all concerned with the care of infants.

Towards the end of 1951, the routine skin testing of children under 5 years, with tuberculin was introduced at the Infant Welfare Clinic. The Mantoux and Jelly Tests are employed. Any positive reactions are referred to the Chest Physician, and all efforts are then concentrated in determining the source of infection. This aspect of Infant Welfare Work forms a part of the Anti-Tuberculosis Scheme in operation throughout the County of Monmouthshire.

Vaccination against Small Pox and Immunisation against Diphtheria are also undertaken at this Clinic. The main object of immunisation schemes is to secure that each generation of infants receives protection at an early age. It is now recommended that an infant should be immunised against Diphtheria at or about the age of 8 months. The fall in the incidence of Diphtheria in recent years is beyond reasonable doubt a remarkable preventive triumph mainly attributable to immunisation. Vaccination against Small Pox is advised when the child has attained the age of 3 months. Since compulsory vaccination has been abolished, the Borough of Abergavenny like the rest of the country, has followed the trend of a decrease in the numbers vaccinated ; from the public health point of view, this is regrettable. Small Pox continues to occur sporadically in various parts of the country and we are never free from the possibility of an outbreak of this disease. Healthy living conditions, good sanitation and general public health services are no substitute for vaccination in connection with the prevention and control of Small Pox.

Since the National Health Service Act, 1946, came into operation, Vaccination against Small Pox and Immunisation against Diphtheria have been carried out free of charge at the surgeries of General Practitioners and at the Maternity and Child Welfare Centres. Great encouragement is given to mothers to have their children vaccinated and immunised.

In the Borough of Abergavenny, the Public Health Department send a Birthday Card to parents reminding them of the advantages of immunisation.

A perturbing factor is that both vaccination and immunisation figures have declined in 1952.

Vaccination against Small Pox.

Age Groups	Numbers vaccinated in 1950	Numbers vaccinated in 1951	Numbers vaccinated in 1952
Under 1 year	16	9	19
1–4 years	4	20	8
5–14 years	—	6	—
15 plus	6	13	12
Totals	26	46	39

Immunisation against Diphtheria.

Age Groups	Numbers immunised in 1950	Numbers immunised in 1951	Numbers immunised in 1952
Under 5 years	85	83	44
5—14 years	2	19	6
Totals	87	102	50

Domiciliary Midwifery Service.

Under the re-allocation of the District Midwifery Service, one District Midwife is resident in the Borough. The monthly average of nursing visits was 96.

District Nursing Service.

There is one District Nurse resident in the Borough. The monthly average of nursing visits was 345.

Health Visiting.

One Health Visitor is employed for routine Domiciliary Visits, Tuberculosis visiting, School Inspections (cleanliness of body and clothes) and for attending the Maternity and Child Welfare Clinic.

Domestic Help Service.

The County Council provides a Domestic Help Service for those cases where there is illness and where there is no able-bodied relative to give the necessary assistance in the household.

The service has been useful in providing assistance to aged persons and cases of Chronic Sick, who otherwise would have had to be admitted to Hospital, thereby helping to relieve the pressure upon hospital administration.

The Service is under the direction of the Area Committee Clerk (Mr. D. A. Lewis). Applicants for the Service are assessed to repay the cost of the service in relation to their income; persons considered to be in financial difficulties receive the Service free of charge.

The hours allocated to each case are recommended after personal investigation by the District Nurse, Midwife or Health Visitor, and are submitted to me for approval. Cases where recommendation exceeds 30 hours per week have to be submitted by the Area Committee Clerk to the County Health Committee for investigation, except maternity cases.

There are approximately 44 Domestic Helps in the area of which approximately 26 are working in the Borough. All are engaged on a Temporary part-time basis. The number of cases attended in the area was 100; the average monthly number of hours worked was 2910.

Ambulance Service.

Abergavenny Borough is served by two St. John Ambulances with four drivers, and they provide the Ambulance Services for the Borough and adjacent area, under the control of the County Ambulance Officer at Caerleon. This system seems to work reasonably well. Control aims at making the most economic use of ambulances, and mutual assistance between local Health Authorities avoids, as far as possible, ambulances running empty. However, it is felt that when the sick are transported by ambulance, there should always be an attendant with some nursing training travelling along with the Ambulance Driver.

Health Education.

The close of the 19th century saw the Public Health environmental services established on a reasonably satisfactory basis. During the last 50 years, these have been improved and the personal health services developed. At first, the importance of Health Education was not fully appreciated but it is now realised that disease cannot be prevented or health promoted by social action alone, there must be full co-operation from an enlightened public.

Today, it is second nature for the appropriately trained staff of a Health Department, whether they be Health Visitors, Home Nurses, Sanitary Inspectors or Doctors to spread the gospel of good hygiene and healthy living.

In order to further disseminate knowledge of Health Education, a Health Conference was held at the County Hall, Newport, in February, 1952, this being the 4th Annual Conference in the County of Monmouthshire. The speakers included:—

A. J. Dalzell Ward, M.R.C.S., L.R.C.P., D.P.H., Deputy Medical Director, Central Council for Health Education.

John Burton, M.R.C.S., L.R.C.P., D.P.H., Medical Director, Central Council for Health Education.

Mrs. I. M. Stirling, M.A., Education Psychologist, The National Association for Mental Health.

Lectures were both varied and interesting, and ranged from Infancy to Adolescence; Adolescence to Maturity; Maturity to Old Age; and Mental Health in Relation to the Family.

Mental Health Service.

A County Psychiatrist was appointed in 1948 for the purpose of a Mental Health Service. This service, in the No. 10 Area, now operates from Leven House. The service is co-ordinated with the Regional Hospital Board and Management Committees.

No adult Guidance Clinics are held in Abergavenny, but individual cases, patients suffering from early nervous strain, and who are finding difficulty in adjusting themselves in their homes or at their work, are seen by Dr. J. Newcombe, the County Psychiatrist. Cases considered too far advanced are referred to the Regional Hospital Board Psychiatrist.

Medical Appliances.

The location of the Medical Appliances Depot for the Borough is St. John Ambulance Hall, Abergavenny.

Welfare Services.

The Welfare Officer of No. 10 Area caters for the needs of Abergavenny Borough as regards Welfare Services, which come within the provisions of the National Assistance Act (1948-51).

National Assistance Act, 1948-51. Section 47.

During 1952, it was not found necessary to take action under Section 47 of the National Assistance Act, 1948-51.

VITAL STATISTICS.

	1938	1947	1948	1949	1950	1951	1952
Area in Acres ...	2398	2398	2398	2398	2398	2398	2398
Population (Estimated)	7925	8427	8532	8597	8534	8904	9058
Inhabited Houses (according to Rate Book) ...	2366	2388	2455	2495	2518	2594	2783
	£	£	£	£	£	£	£
Rateable Value ...	49304	51658	53028	55296	56000	56831	58733
1d. Rate ...	188	202	203	203	207	208	222

1952	*Total*	*M.*	*F.*	*1952*	*Borough*	*County*
Live Births.						
Legitimate	146	68	78	Birthrate per 1,000 of estimated resident population ...	17·0	17·17
Illegitimate	8	2	6			
Total	154	70	84			
Still Births.						
Legitimate	0	0	0	Rate per 1,000 total (Live & Still Births) Births ...	·0	
Illegitimate	0	0	0			
Total	0	0	0	Rate per 1,000 popul'n	·0	0·468

1952	*Total*	*M.*	*F.*	*1952*	*Borough*	*County*
Deaths.						
All Causes	108	59	49	Death rate per 1,000 estimated resident population ...	11·9	11·52
Deaths from Cancer — all ages ...	17	9	8	Average age of death from Cancer- 68 years.		
Death from Cancer of Lung ...	0	0	0			
Deaths due to Pregnancy, Childbirth, Abortion ...					0	
Maternal Mortality Rate (Rate per 1,000 births) ...					0	0·71

Infant Mortality.

Infant Deaths from Measles	...	Nil
Whooping Cough	...	Nil
Diarrhœa	...	Nil
All causes	...	4 (3 m. 1 f.)

Deaths of Children under 1 year of age in Age Groups.

Age Group.		Number of Deaths.
Under 1 week	...	1
1 - 3 weeks	...	1
1 - 2 months	...	0
3 - 5 months	...	2
6 - 8 months	...	0
9 - 12 months	...	0
Total	...	4

	Borough	*County*
Infant Mortality Rate (Rate per 1,000 Live Births)	25·97	33·87
(Legitimate) ,, ,,	27·4	
(Illegitimate) ,, ,,	Nil	

Year.	*Population.*	*Live Births.*	*Deaths.*	*Birth Rate.*	*Death Rate*
1931...	8490 (Estimated)	137	119	16·10	14·01
	8608 (Census)				
1938...	7925 (New Borough)	115	108	14·50	13·6
1939...	7832 do.	118	144	15·10	18·38
1940...	8407 do.	122	149	14·50	17·7
1941...	8769 do.	130	135	14·60	15·39
1942...	8468 do.	134	113	18·80	13·34
1943...	8174 do.	127	122	15·56	14·68
1944...	7931 do.	139	104	17·50	13·11
1945...	8275 do.	141	120	17·0	14·5
1946...	8439 do.	147	110	17·5	13·03
1947...	8427 do.	152	115	18·0	13·64
1948...	8532 do.	146	138	17·1	16·17
1949...	8597 do.	134	94	15·6	10·9
1950...	8534 do.	130	145	14·4	16·99
1951...	8904 do.	161	157	18·1	17·63
1952...	9058 do.	154	108	17·0	11·9

INFECTIOUS DISEASES.

Scarlet Fever	During the year	7 cases were notified
Whooping Cough	do.	48 cases were notified
Measles	do.	1 case was notified
Cerebro-spinal Meningitis	do.	no cases were notified
Infantile Paralysis	do.	no cases were notified
Erysipelas	do.	1 case was notified
Diptheria	do.	no cases were notified
Dysentery	do.	no cases were notified
Encephalitis	do.	no cases were notified
Acute Primary Pneumonia	do.	1 case was notified

TUBERCULOSIS.

Notified :	Pulmonary - M 7 F 7	Non-Pulmonary - M 1 F 4	
Deaths :	do. M 2 F 2	do.	M 0 F 0

Notifiable Infectious Diseases (other than Tuberculosis)
classified according to age groups.

Disease	*Age 0-4*	*Age 5-9*	*Age 10-14*	*Age 15-24*	*Age 25 & Over*	*Total*	*Treated in Hospital*
Diphtheria ...	...	...	...	...	...	...	...
Scarlet Fever ...	1	5	...	1	...	7	6
C.S. Meningitis ...	...	...	...	...	...	...	...
Measles ...	1	...	...	...	...	1	...
Whooping Cough ...	26	18	3	...	1	48	...
Enteric Fever (Para B)	...	...	...	...	...	...	...
Infantile Paralysis ...	...	...	...	...	...	...	...
Dysentery ...	...	...	...	...	...	...	...
Erysipelas ...	...	...	...	...	1	1	...
Encephalitis ...	...	...	...	...	...	...	...
Acute Primary Pneumonia	...	...	...	...	1	1	...
Sal. H. Typhimurium	2	...	...	...	...	2	2

TUBERCULOSIS.

New Cases and Mortality during 1952

AGE	NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
Under 1 year	...	...	...	...	...	...	...	...
1—4 years	...	...	...	...	...	...	...	...
5—9 years	...	...	...	1	...	...	...	...
10—14 years	...	...	...	...	...	...	...	...
15—19 years	...	...	...	...	...	...	...	...
20—29 years	4	2	1	1	...	...	...	...
30—39 years	1	3	...	1	...	...	...	...
40—49 years	1	2	...	1	...	1	...	...
50—59 years	1	...	...	...	2	...	...	...
60 and over	...	...	...	...	...	1	...	...
Totals	7	7	1	4	2	2	...	...

Infectious Diseases.

During 1952, the Borough of Abergavenny was remarkably free from any severe outbreaks of Infectious Diseases.

Diphtheria.

One of the most satisfying facts in the control of infectious diseases has been the nation-wide decline in the incidence of and mortality from Diphtheria. There were no notifications of Diphtheria within the Borough in 1952. Nevertheless, Diphtheria "still kills" and the percentage of children immunised is unsatisfactory, Parents are continually urged to see that their children are adequately protected and they should avail themselves of the facilities provided.

Scarlet Fever.

This remains a mild disease. Only 7 cases were notified in 1952. Although a diminished incidence in Scarlet Fever, it is possible that notification was incomplete, but it is beyond reasonable doubt that fatality from this disease has diminished in recent years.

Measles and Whooping Cough.

The incidence of Measles has ebbed and flowed at intervals of 2 years, 1952 being the inter-epidemic year with only 1 notification. It is noteworthy that Whooping Cough, still a dreaded disease of infancy did not rear its head to any marked degree.

Advances in therapeutic agents with improved nursing care in recent years have helped to lower the fatality from these diseases. Less overcrowding in the homes through reduction in family size, and in some cases improved housing may also have contributed to the decline in mortality.

Infantile Paralysis.

Infantile Paralysis was conspicuous by its absence within the Borough of Abergavenny.

Outbreak of Food Poisoning at Coed Glas Nursery, Abergavenny.

On the 14th of January, 1952, Dr. Gray of the Public Health Laboratory, Newport, reported to me that Salmonella organisms had been isolated in specimens of fæces taken from 2 children resident at Coed Glas Nursery, Abergavenny. These children were immediately admitted to Allt-yr-yn Hospital, Newport.

Specimens of fæces from all members of the staff and children at the Nursery were subsequently submitted to the Laboratory. Twelve other children and three adults gave positive results for Salmonella Typhimurium, and all fifteen were immediately admitted to Allt-yr-yn Hospital.

Upon further investigation it was discovered that the farmer who supplied the milk sold to the Nursery was a carrier of Salmonella Typhimurium organisms. This appeared to be the only likely source of infection.

The milk produced at this farm has since been subjected to pasteurisation. The farmer underwent treatment after which repeated negative fæcal reports were obtained.

Of the cases admitted in hospital one child developed pyrexia and vomiting on the 26th January, 1952. He died on 28th January, 1952, from Toxæmic dúe to Salmonella infection. The others recovered satisfactory.

Tuberculosis.

The Mass Radiography Unit visited the Borough of Abergavenny in May, 1952, and the response of the general population was most satisfactory. Following this visit, one would have expected an appreciable increase in the notifications from Pulmonary Tuberculosis, but this was not the case. Incidence of Tuberculosis, as measured by notification figures, remained more or less constant, so has the fatality rate. However, this gives no real grounds for complacency and calls for renewed efforts in both prevention and early treatment of this disease.

In conclusion, although tremendous improvements have been brought about in the standards of enviromental hygiene, there may still be outbreaks of infectious diseases due to failure of the hygiene of milk and other food control. Therefore, it is still the task of the Medical Officer of Health and her fellow Local Government Officials to maintain constant vigilance.

I have the honour to be,
Your obedient Servant,
S. M. R. HARVEY,
Medical Officer of Health.

Water Supply.

The Town is supplied with water derived from springs situated in the Llwynddu Mountain, and collected in a covered holding reservoir of 6,000,000 gallons capacity.

Here the water is purified by subjecting it to storage and chlorination before being discharged into the services.

The yield of the springs averages some 500,000 gallons per day. This can be supplemented by water from a borehole with verticle shaft electric pump which could provide up to 100,000 gallons per day. In any event an adequate supply is now assured by drawing on the mains supply of the Newport Corporation at Llanfoist.

The consumption of water remained fairly static at the high figure of 50 to 55 gallons per head per day.

Constant vigilance on water wastage was maintained by the Waste Water Inspector employed by the Council.

Four samples of water were taken by the Sanitary Inspector, and were found to be satisfactory. Routine tests of the water by the Reservoir Attendant with the Chlorescope ensures that complete chlorination of the water is carried out.

Particulars regarding Water Services to Borough.

Total number of Dwelling Houses (approx.)	...	2783
Estimated Population ...	...	8904

Number of Dwelling Houses supplied from Public Water Mains.

(i) Direct to Houses	...	2703
(ii) By means of Standpipes	...	80

Estimated number of persons supplied.

(i) Direct to Houses	...	8602
(ii) By means of Standpipes	...	293

A small number of dwellings and farms not within the serving area of the mains involving some 18 dwellings are supplied from small private supplies.

In the case of two bungalows whose private supply is unsuitable, these are still being supplied with regular supplies of drinking water, the extension of the main not yet having been carried out.

These come within the area which can be provided with a mains supply and until this is provided, pure water for drinking purposes is being supplied by the Authority to a cistern erected near the dwellings.

FOOD.

Milk Supplies.

Of the 16 retailers operating within the Borough, 9 sell Tuberculin Tested Raw Milk, 3 sell Tuberculin Tested (Pasteurised) Milk, 3 sell Pasteurised Milk, and 1 retails Raw Milk.

6 samples taken during the year all proved satisfactory, and the high standard of milk distribution was maintained.

There is one Pasteurising and Bottling Plant established in the Borough, viz. : F. Franklyn, Usk Vale Dairy. These premises are, of course, under the supervision of the Medical Officer of the Monmouthshire County Council.

No milk diseases were reported during the year, and the co-operation of the retailers in respect of matters drawn to their notice was such that no legal action was necessary.

Other Foods.

72 visits were made to shop premises and with 2 exceptions a high standard of cleanliness both in premises, staff and methods of handling were apparent.

Inspections at Food Premises during the year.

	No. of Shops.	No. of Inspections.
Butchers Shops	11	30
Retail Food Shops	39	72
Restaurants (including Cafes and Snack Bars)	17	25
Bakeries	8	15
Market	1	46
Slaughterhouses	1	320
Greengrocers and Wet Fish Sales ...	7	15

There is, in the town, one large food factory, viz. : Usk Vale Food Factory, a smaller Mineral Water Factory, Messrs. Hansards (Whitings) Ltd., a progressive outside Caterer, Messrs. R. H. Stevens & Sons, also a Grade 1 Bacon Factory, Messrs. Bonds (Cardiff) Ltd. In other small establishments, Bakery and Flour Confectionery are carried out, and 9 butchers manufacture meat preparations.

Routine inspections are carried out at all the above, and also at the 3 Fried Fish Shops established in the town.

Generally, a satisfactory standard is maintained in all the premises.

Inspection of Food Stuffs other than Meat.

During routine inspections or by request, the following foodstuffs were examined, and found to be unfit for human consumption, after voluntary surrender by the Retailers :—

Canned Foods including Tinned Jams and Meats	967
Bottled Foods including Jam and Sauces	63
Canned Fruit	487
Foods in Packets including Cereals, Cake Mixtures	132
Canned Milk	123
Tinned Imported Cooked Hams	36
Canned Fish	39
Wet Fish	18 lbs.
Carcase Meat	1 ton 72 lbs.
Sugar	25 lbs.
Eggs	32 doz.
Cheese	5 lbs.
Bacon	42 lbs.
Cereals and including Biscuits	58 lbs.

No instance of such food being exposed for sale was encountered.

Ice Cream.

Of the 27 premises registered with this authority under the Sale of Food and Drugs Act, 1938, only 3 are used for the manufacture of ice-cream.

One of these uses the Heat Treatment, the other two adopting the cold mix method. In the case of one of the latter, excellent equipment has been installed for carrying out heat treatment and it is anticipated that it will soon be in production. All the manufacturers comply with the Ice-cream (Heat Treatment) Regulations, 1947.

In the case of the other retailers the practice is to purchase wrapped ice-cream from outside firms who mass-produce the product and who provide refrigerated conservers for the use of the retailers.

6 samples were taken during the year, and while 3 fell below the required standard, it was found on investigation that the poor result was due to inefficient processing and was soon corrected. The co-operation of vendors, particularly those manufacturing was most commendable.

Prevention of Damage by Pests Act, 1949.

Throughout the year the work was carried out in a very satisfactory manner according to the Act.

Two maintenance treatments of the sewers were carried out, the results being summarised as follows :

Treatment No. 1 (April 21st to May 9th, 1952).

Number of Manholes baited	...	182
Number showing complete takes	...	23
Number showing partial takes	...	98
Number showing no takes	...	84

Treatment No. 2 (October 21st to Nov. 1st, 1952).

Number of Manholes baited	...	186
Number showing complete takes	...	Nil
Number showing partial takes	...	52
Number showing no takes	...	134

The method adopted was the placing of bait on the "benching" in the manholes or on trays fixed into the brickwork and provided with thick rope to allow rodents to climb to the trays. Bait and poison used were changed for the second treatment, the poison being deposited wherever a prebait take had been visited. The results were satisfactory and a lessening of surface infestation noticed after each treatment.

The steady decline in the number of takes shows a great reduction in the sewer population and will allow for a possible change of procedure to a percentage test baiting only of the sewer system next year.

This routine was followed by treatment at the Sewage Works and Refuse Tips. This apart from other visits made at more frequent intervals. The attention given to this particular part of the town is justified when one considers that while some years ago it proved a prolific source of infestation for the town, the rat population has now been reduced to almost a negligible number.

Surface Infestation.

Routine surveying of the town area is maintained, and all complaints investigated without delay. There are now no heavy major infestations in the town.

The use of the new poison Warfain has justified itself inasmuch as its continued action in permanent baiting points is so effective and reduces the number of visits necessary for such treatment.

The following is a summary of the work carried out :—

Total number of premises in the area			...	2894
do.	do.	inspected	...	1199
do.	do.	infested by rats	...	100
do.	do.	treated by the Local Authority		113
do.	do.	lightly infested by mice	...	6
Number of block control schemes carried out			...	1

FACTORIES 1937 & 1949.

The following represents the distribution of trades in the factories in the Borough :—

	Number of Factories	Mechanical Power used	With Power not used
Agricultural Machinery Repairs ...	2	2	0
Bakehouses ...	8	7	1
Bacon Curing ...	1	1	0
Beer Bottling ...	1	1	0
Blacksmith ...	2	1	1
Boot and Shoe Repairs ...	6	6	0
Cellulose Spraying ...	4	4	0
Cement Products ...	1	0	1
Egg Grading ...	1	1	0
Electrical Repairs (including Radio)	7	1	6
Firewood ...	2	2	0
Florist (Wreaths) ...	3	0	3
Gas Undertaking ...	1	1	0
Ice-Cream ...	3	3	0
Ironworkers and Engineers ...	1	1	0
Leather Products ...	2	2	0
Locomotive Repairs ...	1	1	0
Meat—Small Goods ...	9	9	0
Milk Pasteurisation and Bottling ...	1	1	0
Mineral Waters ...	1	1	0
Monumental Masonry ...	1	1	0
Motor Repairs ...	9	8	1
Printing ...	2	2	0
Soft Toy Manufacturing ...	1	1	0
Sugar Confectionery ...	1	1	0
Tailoring ...	2	0	2
Upholstery and French Polishing ...	1	1	0
Welding (Acetylene & Electrical) ...	2	2	0
Wool Staplers ...	2	0	2

Outworkers :— 12 outworkers are listed, and they are all concerned with the altering and repairing of wearing apparel.

19 Inspections were carried out, and the following is a statement of cases from which defects were found.

Number of cases in which defects found.

Particulars.	Found	Remedied	Referred to H.M. Insp.	By H.M. Inspector	Prosecutions Instituted
Want of Cleanliness	1	2	0	1	0
Overcrowding	0	0	0	0	0
Unreasonable Temperature	0	0	0	0	0
Inadequate Ventilation	0	0	0	0	0
Ineffective Floor and Drainage	0	0	0	0	0
Sanitary Conveniences—					
(a) Insufficient	0	0	0	0	0
(b) Unsuitable or Defective	1	2	0	1	0
(c) Not separate for sexes	0	0	0	0	0

HOUSING.

The provision of new housing accommodation and the maintenance of existing houses still form one of the major duties of the local authority.

In the former case the authority has almost doubled its building programme 114 houses as against 64 in 1951. The easing of some of the restrictions on private buildings has meant that in this sphere the numbers have been doubled, i.e. 16 as against 8 in 1951.

Unfortunately, however, the difficulties that hamper any extensive work on existing houses are still as great. Little or no reconditioning has been carried out. In a few cases owner-occupiers have improved the amenities of their property by installing bathrooms, hot water systems, etc.

It would appear that some consideration might be given to the policy of improvements by the grants available under the Housing Act, 1949. In this way, dwellings that are otherwise sound in structure might be brought to a higher standard more in keeping with modern requirements and would, without the necessity of providing new houses, generally increase the standard of housing in the town.

It is to be hoped also, that some measures may be adopted that will allow for the enforcement of repairs to substandard houses. This will obviate the necessity for action under the Housing Acts to demolish unfit houses that could, by carrying out necessary repairs and improvements, substantially assist in solving the housing problem.

The authority's scheme for the Allocation of Houses still carries about 500 applicants. During 1952, 80 families in apartments were provided with accommodation and 41 families from houses either by reason of the fact that the dwellings were substandard or overcrowded, because there existed some specific disease which was brought about or aggravated by the conditions under which the family lived, or because they were cases requiring special consideration for instance, key workers.

A large proportion of the Sanitary Inspector's time continues to be given to the scheme for allocation of houses, both in office and outdoor work. Apart from maintaining the files as up to date as possible, 190 investigations have been made, and some 200 interviews given to applicants.

HOUSING STATISTICS

1. **Inspection of Dwelling Houses during the year.**

(a) Total number of Dwelling houses inspected for Housing Defects (under Public Health or Housing Acts)	110
(b) Number of Inspections made for that purpose ...	230

2. (a) Number of Dwellings (included under Sub-heading (1) above which are inspected and recorded under the Housing Consolidated Regulations, 1925 30

(b) Inspections made for that purpose ... 32

Number of dwellings found to be in a state so dangerous or injurious to health as to be unfit for human habitation ... ... *See below*

(In this respect a preliminary survey of the town has revealed some 150 houses which will be considered by the Authority when the housing situation improves or when the opportunity arises by reason of the property becoming vacant)

Number of dwellings (exclusive to those referred to under the preceding sub-heading) found not in all respects reasonably fit for human habitation ... 35

Remedy of Defects during the year without service of Formal Notice.

Number of defective dwelling houses rendered fit in consequence of Informal Notice action by the local Authority or their officers. ... 23

Action under Statutory Powers during the year.

(a) Proceedings under Section 9, 10 & 16 of the Housing Act, 1936.

1. Number of dwelling houses in respect of which notices were served requiring repairs ... Nil

2. Number of dwelling houses which were rendered fit after service of formal notices ... Nil

(a) By Owners.
(b) By local Authority in default of Owners.

(c) Proceedings under Public Health Acts.

1. Number of dwelling houses in respect of which notices were served requiring defects to be remedied 9

2. Number of dwellings in respect of which defects were remedied after service of formal notices.

   (a) By Owners 4

   (b) By local Authority in default of Owners .. Nil

(c) Proceedings under Section 12 of the Housing Act, 1936.

1. Number of separate tenements or underground rooms in respect of which Closing Orders were made ... ... Nil

2. Number of separate tenements or underground rooms in respect of which Closing Orders were determined the tenement or rooms having been rendered fit ... ... Nil

(d) Proceedings under Section 11 & 13 of the Housing Act, 1936.

1. Number of dwelling houses demolished in pursuance of Demolition Orders ... 1

2. (a) Number of dwelling houses in respect of which Demolition Orders were made ... 4

   (b) Undertakings accepted that the house will not be used for human habitation ... 9

House to House Inspections of Council Owned Houses.

Routine inspections have been carried out at the Council's Housing Estates during the year, 233 premises have been visited for inspection of defects and 162 visits respecting housing management.

Verminous or dirty premises noted are dealt with immediately after inspection and if the unsatisfactory condition is not improved the matter is reported to the Council.

Generally the premises are kept in good condition, but there are some tenants who require constant supervision. This is carried out as often as can be arranged.

List of repairs noted either by routine inspection or specially following reports of the rent collector, are sent to the Borough Engineer for his attention.

MEAT INSPECTION.

During the latter years it has been more and more evident that the Abattoir is not entirely suited to the new system of meat distribution. It was undoubtedly quite adequate for the use of the individual butchers before meat rationing came into being, but, for slaughter for wholesale distribution it falls short.

While the structure or fabric of the Abattoir can hardly be improved upon, the layout of the slaughtering halls and lairages with complete absence of the cooling rooms form the crux of the matter.

The effect on meat production is twofold, viz.—

(a) The lack of suitable facilities means that carcases are not handed over in as good a condition as would otherwise exist.

(b) The rate of slaughtering is of necessity slower.

(c) The Abattoir is not being used to its fullest capacity. With suitable conversion this could be increased by at least four times its present output.

(d) The relative situations of lairage and the slaughtering halls means that animals have to be dragged across an open yard, during the process of which some damage must inevitably be caused to the ensuing carcase.

To further the scheme to provide an Abattoir on more modern and hygienic lines the work of preparing plans, etc., was put into the hands of a local firm of Architects. Good progress on this work has been done and at the year end the plans were nearing completion.

At the present time the Abattoir supplies the Town of Abergavenny, Crickhowell and District, and certain portions of the Rural areas around.

During the year 320 visits were made to the Abattoir for the purpose of carrying out a 100% inspection of all animals slaughtered.

The tables given below show the number of animals killed, particulars of meat condemnation and incidence of disease.

Number killed :

Cattle excl. Cows.	Calves.	Sheep & Lambs.	Pigs.
654	644	6242	3956
Cows 236			

Number inspected :

890	644	6242	3956

All Diseases except Tuberculosis :

Whole carcases condemned—

Cattle.	Calves.	Sheep & Lambs.	Pigs.
19	7	49	11

Part carcases condemned—

32	2	17	2

Carcase of which some organ was condemned—

Cattle.	Calves.	Sheep & Lambs.	Pigs.
495	1	860	21

Percentage of the number inspected with disease other than Tuberculosis—

61·35	1·2	14·6	0·8

Tuberculosis only :

Whole carcases condemned—

Cattle.	Calves.	Sheep & Lambs.	Pigs.
2	Nil.	Nil.	Nil.

Part carcases condemned—

10	Nil.	Nil.	28

Carcase of which some organ was condemned—

Cattle.	Calves.	Sheep & Lambs.	Pigs.
12	Nil.	Nil.	28

Percentage of the number of animals killed affected with Tuberculosis—

2·7	Nil.	Nil.	1·4

Percentage of the number of cattle killed affected with Tuberculosis—

3·66

Total weight of carcase meat condemned— 5 tons 14 cwts.

Total weight of offal condemned— 4 tons 10 cwt. 3 qrs.

RAINFALL IN 1952.

Rain Gauge ... Diameter of Funnel, 5 inches.
Height of Top Above Ground 1 ft.
,, Sea Level 215 ft.
Situation :— Bailey Park.

Month.	*Total Depth inches.*
January ...	4.5
February ...	0.8
March ...	2.0
April ...	2.9
May ...	3.1
June ...	2.2
July ...	1.3
August ...	6.2
September ...	4.7
October ...	5.7
November ...	3.5
December ...	3.7
TOTAL ...	40.6

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